

Food Program Official Inspection Report

Siskiyou County Community Development Department Environmental Health Division 806 S. Main Street Yreka, California 96097

phone: (530) 841-2100, fax: (530) 841-4076

Facility	Facility Name: Permit #						
Address:							
Permit	Hole	der:				Permit To	
Phone:						Valid	Not Valid
						E-mail:	
Food S	afet	ty Certified Employ	ee:			Expiration	Date:
			MAJ	OUT	COS	The marked items represent Health Code violations and must be corrected	as follows:
Ġ.	1	Food Temp.				·	
em	2	Prep./ Service					
Je/ J	3	Storage/ Disp.					
Tin	4	Frozen Food					
tion	5	Pure Food					
Protection Time/ Temp.	6	Reused Food					
Ā	7	Transportation					
a)	8	Storage Fac.					
rage	9	Refrig. Units					
Stc	10	Thermometer					
Food Storage	11	Hazardous Mat.					
ш	12	Spoils					
j.	13	Wash/ Sanitize					
Uten./Equip.	14	Equip. Condition					
ten.	15	Utensil Condition					
Ò	16	Storage					
e O		Handwashing					
loye	-	Employee Hygiene					
Employee		Employee Habits					
		Food Cert./ Card					
Water		Water					
≶		Cross Con.					
Waste		Liquid Waste					
> _	_	Refuse					
Vermin		Rodents/ Insects					
>		Animal/ Fowl					
	_	Ventilation					
ties		Doors					
Facilities		Floors Walls - Ceilings					
		Toilet Fac.					
		Janitorial Fac.					
		Lighting					
Misc.		Clothing - Linen					
		Signs					
		Misc.					
MAJ =			UT =	Out o	of con	npliance COS = Corrected on-site	
Received By (Print): Received by (Signature):							
REHS (Print): Phone:							

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The marked items represent Health Code violations and must be corrected as follows:	Facility Name:		
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